

Forming Church, Community and Health Facility Partnerships

*David Boan, PhD
WEA Global Taskforce on Covid-19*



Forming Church, Community and Health Facility Partnerships

David Boan, PhD | [WEA Global Taskforce on Covid19](#)

Introduction

A Community Health Partnership is a cooperative arrangement between the health authorities and facilities and the community. Such cooperative arrangements are even more important during a pandemic because of the risks to the health system as well as the community, the need for trust between all members of the community and health authorities, and the importance of giving voice to community members who have special needs or suffer unintended consequences of some mitigation methods.

The church has an important role in creating and maintaining such cooperative relationships. The church is often the most trusted agent in the community and can build trust with others. It is often in the best place to see all members of the community and recognize their needs. It can be the voice for the health system to speak to members of the community and for the community to speak to health authorities.



Creating community health partnerships is also important for several other recommended strategies for churches. Care of family members with Covid-19 depends on the church having the support of health professionals. Addressing misinformation is best conducted in partnership with health professionals who can provide accurate information, to name just two examples. For these reasons and more, we offer this guide to creating and operating community health partnerships.

Why Form A Community Health Partnership?

The idea of a church, community, and health facility (or health authority) partnership has a long history from work on HIV, Ebola, healthcare in impoverished communities, among others. The benefits are many and far-reaching. For the health facility or authority, they include:

- 1. Greater participation in health education, promotion, and, in a pandemic, compliance with guidelines.**
- 2. Health system access to hard to access groups.**
- 3. Promotion of general health practices.**

For the faith community, the benefits can include:

- 1. Access to a source of trustworthy information**
- 2. Improved health and safety of church members**
- 3. Adaptation of health guidelines to better reflect the needs of different community groups**
- 4. Opportunity to advocate for groups with special or unmet needs**

How To Form a Community Health Partnership?

1. Form a representative faith group or coalition

It can be challenging and extremely resource-intensive for a hospital to work separately with every house of worship in a community. If at all possible, form a coalition for faith and community health that focuses the work with the health facilities

2. Know your history and culture and how it impacts community health

Any community will have a history that may help or hinder, forming a community partnership. Experience in successful cooperation can provide a basis for building a partnership, while a history of conflict or distrust can present additional barriers. A candid conversation about successes that can be used as examples of obstacles that may need to be addressed by the new partnership are essential as you plan your work together.

3. Discuss shared values and aims with health system leaders.

In working together, it is important to discuss at the start what are the shared concerns, values and aims that bring you together. These points of common interest and value are the foundation of your partnership or joint effort. Some examples of shared values and aims are:

- Protect the community from the pandemic
- Protect the most vulnerable among us
- Develop confidence and trust in the health system guidelines
- Gain the support and help from the community in protecting health facilities and health workers

Once you have established shared values and aims, move the discussion to how you will work together to advance these shared values.

4. Identify vulnerable populations, their needs, and preferred ways to communicate with them

The church needs to advocate for those who have special needs or contexts that may impact their ability to implement health guidelines. This includes speaking to health authorities on behalf of these groups. These groups may consist of:

- Those living in extreme poverty
- Migrant workers and day workers
- Refugees and internally displaced people
- Handicapped and chronically ill
- Women and children

5. Discuss health system policies for the community

How is the health system planning to serve the community and what are the specific actions it is taking?

- Facemasks:
 - What is the policy on facemasks
 - Are facemasks encouraged for communities that are otherwise unable to implement mitigation practices?
- Handwashing
 - What is the policy on handwashing?
 - How is it implemented in communities with limited access to potable water and sanitary supplies?
 - If potable water is accessed from public sources, how is sanitation maintained around these points of congregation?
- Physical distance
 - What is the policy on physical distance in urban poor communities?
 - What assistance is there for groups that are severely impacted by distancing and lockdown?
- Health facility sanitation
 - What are the main threats for facility sanitation in addition to infected patients?
 - How can the community work with the health facility to improve infection protection?

6. Discuss communication and education

Communication and education are areas where the faith community can play an especially important role. This role is based on the ability to serve as a trusted member of the community, the ability to detect myth and misinformation, and the ability to reinforce messaging and education.

- What are the messages the health system is communicating to the public?
- What are the barriers to public understanding and acceptance of these messages?

7. What role may the faith coalition play in the implementation in any of the topics discussed from the above list?

For each of the policies or strategies consider the role the faith community can play, especially in promoting community acceptance and cooperation.

8. Create a working group to oversee the partnership and review it periodically to make sure it is working for all involved.

Depending on the size of the community partnership, you may need a smaller working group to manage the joint effort. Consider the following:

- A working group should reflect the community, including people who can speak for vulnerable groups
- Remember, relationships always require managing difficulties and take time to build. Church and hospital partnership is no different. The working group can be the place where people make concerns known and which addresses challenges and conflicts.

What Else Should a Church, Community, Health Facility Partnership Do About Covid-19?

- Identify barriers to cooperation with health guidelines and develop a joint solution
- Recognize that standard mitigation strategies do not work for many groups. The coalition can engage people from the marginalized (in terms of health guidelines) and work together to develop alternative practices
- Disseminate information, and reinforce that information, to those without access to standard communication channels
- Identify and confront myths and misinformation that undermine cooperation with health guidelines
- Consider what could be done to further disaster relief efforts in the community and how the faith communities can best become involved.
- Consider what could be done together for further community health and community development for the (financial) recovery of the community after the crisis is over.